FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6) AND/OR**

OMB APPROVAL

OMB NUMBER: 3235-0076 May 31, 2005 Expires:

Estimated average burden hours per response......16.00

	SEC USE ONL	Y
Prefix		Serial
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	Date Received	
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1	NIFORM LIMITED OFFERING E.	AEMITION .	Date Received
Name of Offering (eheck if ih	is is an amendment and name has changed, and indicate	change.) 1/6	2856
Filing Under (Check box(es) that ap Type of Filing: New Filing	ply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Amendment	☐ Section 4(6) ☐ [JLOE
	A. BASIC IDENTIFICATION DATA		10411 01114 0010 0 888
1. Enter the information requested a	bout the issuer		
Name of Issuer (Check if this is	s an amendment and name has changed, and indicate cha	nge.)	<u> </u>
Quantiva, Inc.		03	8019595
Address of Executive Offices	(Number and Street, City, State, Zip C		or (mornaing river coast)
100 Village Boulevard, 3 rd Floor, Pri		(609) 514-9540	
Address of Principal Business Opera	,	Code) Telephone Numb	er (Including Area Code)
(if different from Executive Offices)			•
Brief Description of Business To provide computer network servic	e management		
Type of Business Organization			· · · · · · · · · · · · · · · · · · ·
⊠ corporation	☐ limited partnership, already formed	☐ other (please specify	·):
□ business trust	☐ limited partnership, to be formed	,,	,
Actual or Estimated Date of Incorpor Jurisdiction of Incorporation or Orga	ration or Organization: inization: (Enter two-letter U.S. Postal Service abbreviat CN for Canada; FN for other foreign jurisdict		PROCESSEI D E APR 03 2003
GENERAL INSTRUCTIONS			

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee. There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Con failure to file the appropriate federal notice will not result in a loss of an available state exemption $\dot{f u}$ such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Z. Alan Fink Business or Residence Address (Number and Street, City, State, Zip Code) Quantiva, Inc. 100 Village Blvd., 3rd Floor, Princeton, NJ 08540 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Executive Officer ☐ General and/or □ Director Managing Partner Full Name (Last name first, if individual) Ronald Hiller Business or Residence Address (Number and Street, City, State, Zip Code) Quantiva, Inc. 100 Village Blvd., 3rd Floor, Princeton, NJ 08540 Check Box(es) that Apply: ☐ Beneficial Owner □ Executive Officer ☐ General and/or □ Promoter □ Director Managing Partner Full Name (Last name first, if individual) Nina Saberi (Number and Street, City, State, Zip Code) Business or Residence Address Quantiva, Inc. 100 Village Blvd., 3rd Floor, Princeton, NJ 08540 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Mikko Suonenlahti Business or Residence Address (Number and Street, City, State, Zip Code) Quantiva, Inc. 100 Village Blvd., 3rd Floor, Princeton, NJ 08540 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Charles Meakem Business or Residence Address (Number and Street, City, State, Zip Code) Quantiva, Inc. 100 Village Blvd., 3rd Floor, Princeton, NJ 08540 Check Box(es) that Apply: ☐ Promoter ⊠ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)

(Number and Street, City, State, Zip Code)

■ Beneficial Owner

(Number and Street, City, State, Zip Code)

□ Executive Officer

☐ General and/or

Managing Partner

□ Director

Etienne Perold

Business or Residence Address

Check Box(es) that Apply:

Castile Ventures, L.P.
Business or Residence Address

162 North Eighth Ave., Highland Park, NJ 08904

890 Winter Street, Suite 140, Waltham, MA 02451

Full Name (Last name first, if individual)

□ Promoter

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
3i Technology Partners L.P.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
890 Winter Street, Suite 140, Wa	ltham, MA 02451				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Öwner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Draper Fisher Jurvetson Gotham	Venture Fund L.P.				
Business or Residence Address		er and Street, City, State, 2	Cip Code)		
Penn Com Plaza, 132 West 31st S	t Suite 1102 New	V York NY 10001			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if ind	ividual)	·			Managing Partner
	,		-		
Business or Residence Address	(Numb	er and Street, City, State, Z	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first if ind	inidual)				Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		,
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	<u> </u>			
Business or Residence Address	(Numbe	er and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				,
Business or Residence Address	(Number	er and Street, City, State, Z	ip Code)		

				B. INF	ORMATIC	ON ABOU	r offeri	NG				
1. Has the is	suer sold, o	r does the is	ssuer intend	to sell, to	non accredi	ted investor	s in this off	fering?				No ⊠
			Ans	swer also in	Appendix,	Column 2,	if filing und	der ULOE.				
2. What is th	ie minimum	investment	t that will b	e accented	from any in	dividual?					\$ 17,60	4.00
z. What is th	ic minimum.	i ili v e stille ili	t that will o	e accepted	nom any m	arriduar:		••••••••	****************			1.00 No
3. Does the	offering per	mit joint ov	vnership of	a single un	it?		•••••			******	⊠	
4. Enter the remuneration agent of a bro to be listed an Full Name (L	for solicita oker or deal re associate	tion of pure er registered d persons o	chasers in c d with the S f such a bro	onnection v SEC and/or	vith sales of with a state	securities or states, l	in the offeri	ng. If a per of the brok	rson to be li ter or deale	sted is an r. If more	associated	person or
D. T.	V	11 01	1 10		St. 1. 7'- 6	5. 1.5	<u>-</u>					
Business or F	Residence A	.ddress (Nu	mber and S	treet, City,	State, Zip C	lode)						
			<u> </u>									
Name of Ass	ociated Bro	ker or Deal	er									
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States in Whi (Check "					Solicit Purc				••••••		🗆 /	All States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name n	rst, 11 inaivi	duaij									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asse	ociated Bro	ker or Deal	er			<u></u>	<u> </u>	<u> </u>		· ·		
States in Whi	ch Person I	isted Has S	folicited or	Intends to 5	Solicit Purc	hasers						
		or check ind									🗆 A	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name II	rst, if indivi	dual)									
D : E		11 07	1 10		. 7 .							
Business or R	tesidence A	daress (Nui	mber and S	treet, City,	State, Zip C	ode)						
N. CA	1 D	1										
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi								· · · · · · · · · · · · · · · · · · ·				11.04
(Check ".	All State" o	r check ind [AZ]	ividual Stat	es) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	 [GA]	[HI]	All States [ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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	Type of Security		regate ring Price		moui	nt Already Sold
	Debt	\$	0		\$	0
	Equity	\$	00		\$	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$ <u>_2</u> ,	500,000	-	S_1	,250,000
	Partnership Interests	\$	0		\$	0
	Other (Specify)	\$	0		\$	0
	Total	\$ <u>2.</u>	500,000		\$ <u>1</u>	,250,000
	Answer also in Appendix, Column 3, if filing under ULOE.					
1	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		umber vestors		Dol	ggregate ar Amoun Purchases
	Accredited Investors		5		\$ <u>1</u>	,250,000
	Non-accredited Investors		0		\$	0
	Total (for filings under Rule 504 only)		N/A _		\$	0
	Answer also in Appendix, Column 4, if filing under ULOE.					
5	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering		pe of curity			ar Amouni Sold
	Rule 505		N/A		\$	N/A
	Regulation A		N/A		\$	N/A
	Rule 504		N/A		\$	<u>N/A</u>
	Total		N/A		\$	N/A
4. ;	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs				\$	0
	Legal Fees				\$	15,000_
	Accounting Fees				\$	
	Engineering Fees				\$)
	Sales Commissions (specify finders' fees separately)	•••••••			\$	<u> </u>
	Other Expenses (identify)				\$	
	Total				\$	15,000_

C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND	USE OF P	ROCEEDS		
1 and total expenses furnished in response "adjusted gross proceeds to the issuer." 5. Indicate below the amount of the adjusted grused for each of the purposes shown. If the estimate and check the box to the left of the estimate and check the sextimate an	e offering price given in response to Part C - Questic to Part C - Question 4.a. This difference is the construction of the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal orth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	\$2,485,000 Payments To Others	
Salaries and fees		🛘		S 0	
Purchase of real estate			\$_0		
Purchase, rental or leasing and installation	n of machinery and equipment			□ \$ <u>0</u>	
	s and facilities			□ \$ 0	
Acquisition of other businesses (includir offering that may be used in exchange fo issuer pursuant to a merger)	🗆	\$_0	0 \$ 0		
				S 0	
- '			\$_0		
Other (specify):			\$_0	□ \$ <u>0</u>	
				□ \$ <u>0</u>	
Total Payments Listed (Column totals added)					
	D. FEDERAL SIGNATURE				
following signature constitutes an undertakin	ed by the undersigned duly authorized person. If the g by the issuer to furnish to the U.S. Securities and I support to any non-accredited investor pursuant to para	Exchange C	Commission, upo		
Issuer (Print or Type) Quantiva, Inc.	Signature		Date		
		1	4-1-	2003	
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Z. Alan Fink	President				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)